

FOR BOARD USE ONLY

Amount Submitted _____

Date _____

Receipt # _____



FOR BOARD USE ONLY

Certificate Number _____

Date Issued _____

Applicant No. _____

GEORGIA STATE BOARD OF PROFESSIONAL ENGINEERS & LAND SURVEYORS

Post Office Box 13446 • Macon, Georgia 31208 • (478) 207-2440

www.sos.state.ga.us/plb/pels/

APPLICATION FOR CERTIFICATE AS AN ENGINEER IN TRAINING

Application Fee \$20 (non-refundable)

License Type: ENGINEER IN TRAINING

Additional License Types (currently or previously issued by the Georgia Professional Licensing Boards):

Method Obtained by:

Applicant is applying for above referenced license by: Examination

Name as desired on License: _____

First Middle Last

Name as shown on exam records or transcripts
(if different) _____

First Middle Last

Social Security Number _____ **Date of Birth** _____

Physical Address _____

Number and Street Apt. No City/State Zip

P.O. Box not acceptable

Mailing Address _____

(if different) Number and Street Apt. No City/State Zip

Telephone Number Day Telephone Number Evening E-Mail Address

Affiliation:

Name of firm _____

Physical Address _____

Number and Street Apt. No City/State Zip

P.O. Box not acceptable

Mailing Address _____

(if different) Number and Street Apt. No City/State Zip

NOTE TO APPLICANT: This information will be entered into the Division database for Accounting and Licensing purposes. All items must be completed, and then duplicated on the next page of the application for Board review.

* THIS INFORMATION IS AUTHORIZED TO BE OBTAINED & DISCLOSED TO STATE & FEDERAL AGENCIES PURSUANT TO O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 101.

LIST BELOW FIVE REFERENCES, NOT RELATED TO YOU BY BLOOD OR MARRIAGE, OF WHOM AT LEAST THREE ARE REGISTERED, ACTIVE PROFESSIONAL ENGINEERS. ALL FIVE MUST HAVE PERSONAL KNOWLEDGE OF YOUR QUALIFICATIONS.

CERTIFICATION BY REFERENCES: I certify that I have been personally acquainted with applicant since the year indicated opposite my name; that I have read the foregoing statements, which so far as known to me are correct; that I believe the applicant to be of good character and repute; and I hereby recommend the applicant as entirely worthy of consideration for certification as an Engineer-in-Training in the State of Georgia pursuant to law.

NAME (Signature; print name underneath)	ADDRESS (Include number and street name)	REG # & ST OF REG	HAVE KNOWN APPLICANT SINCE
1.			
2.			
3.			
4.			
5.			

AFFIDAVIT

_____ being duly sworn, says that he/she is the person who is referred to in the foregoing application for certification as an
(Applicant's Name)
Engineer-in-Training in the State of Georgia, and that the statements and representations therein contained are true in every respect. I hereby authorize the Georgia Board of Registration for Professional Engineers and Land Surveyors to release my score to the school.

Sworn to before me this _____ day of _____, (year) _____.

State of Georgia

County of _____ (Signature of Applicant) (Date)

(Notary Public) NOTARY SEAL
(Required)

My Commission Expires:_____

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